

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30 2006

This report is mandatory under P L 86 257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <u>9428</u>	2 Fiscal Year Covered From <u>11</u> / <u>11</u> / <u>04</u> Through <u>12</u> / <u>31</u> / <u>04</u>
3 Name and address of person filing Name <u>ROBT. W PIERSON</u> P O Box Bldg Room No if any _____ Street <u>4415 U HARRISON</u> City <u>HILLSIDE ILL</u> <u>60162</u> State <u>ILL</u> ZIP Code + 4 <u>60162</u>	4 Name file number and address of labor organization Name <u>LOCAL 9 FBEL</u> Labor Organization File Number <u>015919</u> P O Box Building and Room Number if any _____ Street <u>4415 U HARRISON</u> City <u>HILLSIDE ILL</u> State <u>ILL</u> ZIP Code + 4 <u>60162</u>
5 Position in labor organization <u>BUS MGR</u>	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent

6 Name and address of Employer (including trade name if any) Name _____ Trade Name if any _____ P O Box Bldg Room No if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7 a Nature of Interest, Transaction or Income _____ _____ _____ 7 b Amount _____ _____ _____
--	---

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions)

Signed [Signature]

On 8-12-04
Date

708 449 9000
Telephone Number

Name of Person Filing

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Robert E. FitzgeraldTrade Name if any P O Box Bldg Room No if any Street 714 W BurlingtonCity LAGRANGEState IL ZIP Code + 4 60525

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Robert E. FitzgeraldTrade Name if any P O Box Bldg Room No if any Street 714 W BurlingtonCity LAGRANGEState IL ZIP Code + 4 60525

11 a Nature of such dealing

UNION ATTORNEY

11 b Approximate dollar value of such dealing

30,850.73

12 a Nature of interest held or income received

CHRISTMAS GIFT 12/04

12 b Amount

67.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Robert Fitzgerald

Trade Name if any

P O Box Bldg Room No if any

Street 714 W BurlingtonCity La GrangeState ILLZIP Code + 4 60525

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Robert Fitzgerald

Trade Name if any

P O Box Bldg Room No if any

Street 714 W BurlingtonCity La GrangeState ILLZIP Code + 4 60525

11 a Nature of such dealing

Union Attorney

11 b Approximate dollar value of such dealing

35000

12 a Nature of interest held or income received

Lunches Dues

12 b Amount

2964

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State

ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing ROBT W PIERSON

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Kelly MarrellTrade Name if any Qualified Plans CONTING

P O Box Bldg Room No if any

Street 3013 S Wolf RdCity West ChesterState FL ZIP Code + 4 60154

9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name LINE CLEARANCE BEVILL TRUSTTrade Name if any TIC INTERNATIONAL

P O Box Bldg Room No if any

Street 6525 CENTURION DRCity LANSINGState MI ZIP Code + 4 48917

11 a Nature of such dealing

HEALTH + WELFARE CONSULTANT

11 b Approximate dollar value of such dealing

UNKNOWN

12 a Nature of interest held or income received

CHRISTMAS LUNCH
DEC 13 2004

12 b Amount.

APPR \$16.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing

Robert J. Pearson

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Gold Berg, W. P. S. 120 Alamo, LTD

Trade Name if any

P O Box Bldg Room No if any 34th Floor

Street 601 East Wacker Dr. 34th Floor

City Chicago

State IL ZIP Code + 4 60601

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name FBI Local 17

Trade Name if any

P O Box Bldg Room No if any 830

Street 4415 W. Madison St

City Hillside

State IL ZIP Code + 4 60192

11 a Nature of such dealing

Lawyer that represents members of labor organization on women's comp cases

11 b Approximate dollar value of such dealing

UNKNOWN

12 a Nature of interest held or income received

Lunches

12 b Amount

Est \$5.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing

Patricia J. [Signature]

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name GOLD BEAG, W PISM, N & CAIRO, LTD

Trade Name if any

P O Box Bldg Room No if any

34th FloorStreet ONE EAST WACKER DR, 34th FloorCity CHICAGOState ILLZIP Code + 4 60601

9 Business deals with



a Labor Organization



b Trust



c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name FBI - W 60601 ?

Trade Name if any

P O Box Bldg Room No if any

23CStreet 4415 N. HARRISON STCity HillsideState ILZIP Code + 4 60192

11 a Nature of such dealing

LAWYER THAT REPRESENTS
MEMBERS OF LABOR ORGANIZATION
ON WORKMANS COMP CASES

11 b Approximate dollar value of such dealing

UNKNOWN

12 a Nature of interest held or income received

SPONSORED DINNER AT
ILL ELECTRICAL CONFERENCE
SPRING SESSION 2004

12 b Amount

Est 60.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State

ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐or Consultant ☐

?

14 b Amount of payment

Name of Person Filing

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name GOLD BEAG, W. P. SMITH, INC., LTD.

Trade Name if any

P O Box Bldg Room No if any 34th 1-1000Street ONE EAST WACKER DR 34th FloorCity CHICAGOState ILL. ZIP Code + 4 60601

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name IFEW Local 117

Trade Name if any

P O Box Bldg Room No if any 630Street 11415 W. NORTH AVE. 3rd FloorCity HillsideState IL ZIP Code + 4 60192

11 a Nature of such dealing

LAWYER that represents
members of LABOR ORGANIZATION
ON WOMEN'S COMP CASES

11 b Approximate dollar value of such dealing.

UNKNOWN

12 a Nature of interest held or income received

Sponsored Diner at
ILL Electrical Conference
Fall Session 2004

12 b Amount.

Est. 60.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing

Robert W. Pearson

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name TED DisabatoTrade Name if any Clark & Asser

P O Box Bldg Room No if any

Street 333 W WackerCity ChicagoState IL ZIP Code + 4 60606

9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Line Clearance Benefit & Pension Funds

Trade Name if any

P O Box Bldg Room No if any

Street 6525 Centurion DrCity LaSalleState MI ZIP Code + 4 48917

11 a Nature of such dealing

Investment Consultant

11 b Approximate dollar value of such dealing

34,500

12 a Nature of interest held or income received

Dinner following Line Clearance Membership Meeting

12 b Amount

135.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐or Consultant ☐

?

14 b Amount of payment

Name of Person Filing

Scott R. Purnell

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name *Middle States Elec Cont ASS.*

Trade Name if any

P O Box Bldg Room No if any

Street *245 Fencil Ln*City *Hillside*State *IL* ZIP Code + 4 *60162*

9 Business deals with

☐ a Labor Organization☐ b Trust☒ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name *Middle States Elec Cont ASS.*

Trade Name if any

P O Box Bldg Room No if any

Street *245 Fencil Ln*City *Hillside*State *IL* ZIP Code + 4 *60162*

11 a Nature of such dealing

Middle States CONTRACTORS ASS.

11 b Approximate dollar value of such dealing

UNKNOWN

12 a Nature of interest held or income received

CHRISTMAS DINNER

12 b Amount

APPROX 500⁰⁰

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing <u>Robert W. Person</u>	File Number U
---	---------------

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name TODD DAVIS

Trade Name if any Chicago Asset Mgt Co

P O Box Bldg Room No if any

Street 70 W. MADISON ST

City Chicago

State ILL ZIP Code + 4 60602

9 Business deals with

- ☐ a Labor Organization
- ☒ b Trust
- ☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name LOCAL 9 TRUSTEE FUND

Trade Name if any Chicago Asset Mgt

P O Box Bldg Room No if any

Street 70 W. MADISON ST

City Chicago

State ILL ZIP Code + 4 60602

11 a Nature of such dealing

INVESTING PROSPECT

11 b Approximate dollar value of such dealing

0

12 a Nature of interest held or income received

LUNCHEON TO DISCUSS
POTENTIAL SERVICES AND
ORGANIZATION

12 b Amount

11-04

43.02

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐

or Consultant ☐

?

14 b Amount of payment

Name of Person Filing

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name MIDDLE STATES ELC CONTRACTOR ASSTrade Name if any SAMEP O Box Bldg Room No if any Street 245 FENEL LANECity HILLSIDE ILLState ILL ZIP Code + 4 60162

9 Business deals with

☐ a Labor Organization☐ b Trust☒ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name MIDDLE STATES ELC CONTRACTOR ASSTrade Name if any SAMEP O Box Bldg Room No if any Street 245 FENEL LANECity HILLSIDE IState ILL ZIP Code + 4 60162

11 a Nature of such dealing

Collecting Payroll Employees' Money

11 b Approximate dollar value of such dealing.

0

12 a Nature of interest held or income received

Interest in construction and
expenses and for attorney
advice, personal
conferences

12 b Amount

estimated 2500.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐or Consultant ☐ ?

14 b Amount of payment